

No. **W 19449**

Return to:  
SECRETARY OF STATE  
700 WEST JEFFERSON  
PO BOX 83720  
BOISE, ID 83720-0080

**NO FILING FEE IF  
RECEIVED BY DUE DATE**

**Due no later than May 31, 2003  
Annual Report Form**

1. Mailing Address - Correct in this box, if applicable

EMERGENCY MEDICAL MANAGEMENT SOLUTI

5999 E GATEWAY DR

BOISE, ID 83716

2. Registered Agent and Office **NO PO BOX**

ALLAN R BOSCH  
225 N 9TH ST STE 210

BOISE, ID 83702

3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Members.

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Manager	Louis T. Conley	5999 E Gateway Dr	Boise	ID	83716
Member	Kimberly R Conley	5999 E Gateway Dr	Boise	ID	83716

5. Organized Under the Laws of:

IDAHO  
W 19449

6.

Signature

Date

3/7/03

Name (Typed or Printed)

Louis TAD Conley

Title

Manager

**Do Not Tape or Staple**

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